

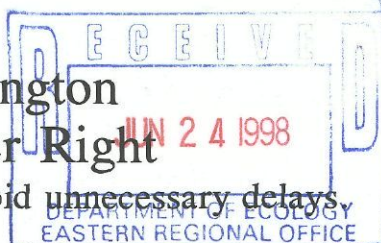


\$10.00 Non-Refundable Fee

## State of Washington

### Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.



For Ecology Use

Fee Paid \$10.00

Date 6-24-98  
Money order #69032128904  
JIC

#### Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name JACOB & SHARON GRISMER Home Tel: ( ) NO - PHONE (10/11/99) same  
Mailing Address 8898 Hwy 17 SOUTH Work Tel: ( ) -  
City WARDEN State WA Zip +4 98857 + 9582 FAX: ( ) -

#### Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☒ Same as above

Name \_\_\_\_\_ Home Tel: ( ) -  
Mailing Address \_\_\_\_\_ Work Tel: ( ) -  
City \_\_\_\_\_ State \_\_\_\_\_ Zip +4 \_\_\_\_\_ + \_\_\_\_\_ FAX: ( ) -  
Relationship to applicant \_\_\_\_\_

#### Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than (220 gpm) 25 gallons per minute ☒ gallons per minute or ☐ cubic feet per second, from a ☐ surface water source or ☐ ground water source (check only one) for the purpose(s) of DOMESTIC, IRRIGATION, STOCK WATER. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: 40 ACRE FT per year

☒ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed: CONTINUOUS MULTIPLE DOMESTIC SUPPLY for 3 HOMES, STOCK WATERING, AND SEASONAL IRRIGATION OF 20 ACRES

From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

#### Section 4. WATER SOURCE

If SURFACE WATER	If GROUNDWATER <input checked="" type="checkbox"/>
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for <u>(2)</u> well(s). <u>1 well is already dug.</u> <u>1 proposed for future building site</u>
Number of diversions: _____	Size & depth of well(s): <u>6" well at 220 ft deep</u>
Source flows into (name of body of water):	

#### LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner:

500' south & 300' EAST of the N.W. corner of section 20.

1/4 of	1/4 of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>S&amp;N</u>	<u>N</u>	<u>20</u>	<u>17</u>	<u>30</u>	<u>GRANT</u>			
<u>NW</u>	<u>NW</u>							

For Ecology Use Date Received: 6-24-98 Priority Date: 6-24-98  
SEPA: ☒ Exempt/Not Exempt FERC License # \_\_\_\_\_ Dept. Of Health # \_\_\_\_\_  
Date Accepted As Complete 10/6/1999 By JK Date Returned \_\_\_\_\_ By \_\_\_\_\_ WRIA: 41

I-59 FAMILY FARM

ECY 040-1-14  
Rev. 9/95 F

APPLICATION

AP088

"COLUMBIA BASIN"

Appl. No.: G 330188



## Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: \_\_\_\_\_
- B. Briefly describe your proposed water system. (See instructions.)  
A 1/2 Hp submersible pump in my 220' deep well pumping 25 gpm to future ~~irrigation~~ sprinkler system to raise pasture for feeding cattle & for raising a large garden area to be sold at street markets and fairs = also house hold use
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☒ NO  
PROVIDE DOCUMENTATION. BUT I DO INTEND TO FILE A WATER CLAIM

## Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 23 <sup>TOTAL</sup> Type of connection 1 - MAIN House & 1022 RENTALS  
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☒ NO  
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☒ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☒ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

## Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 20 <sup>ok, per Grissom classification.</sup>
- B. List total number of acres for other specified agricultural uses:
- |                                  |                |
|----------------------------------|----------------|
| Use <u>COMMERCIAL garden</u>     | Acres <u>5</u> |
| Use <u>PASTURE - cattle</u>      | Acres <u>5</u> |
| Use <u><del>STOCKWATER</del></u> | Acres <u>5</u> |
| <u>ORCHARD = fruit trees</u>     |                |
- C. Total number of acres to be covered by this application: 15
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)  
Add up the acreage in which you have a controlling interest, including only:
- ‡ Acreage irrigated under water rights acquired after December 8, 1977;
  - ‡ Acreage proposed to be irrigated under this application;
  - ‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☒ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO  
If yes, enter permit no: \_\_\_\_\_
- E. Farm uses:
- Stockwater - Total # of animals 20 Animal type Beef cows (If dairy cattle, see below)
- Dairy - # Milking 0 # Non-milking 0

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## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☒ YES ☐ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site. FROM WARDEN, WA DRIVE WEST TO RD SE = TURN LEFT OR SOUTH AND DRIVE 1 mile TO THE NW CORNER OF SECTION 20. → CONTINUE DRIVING ABOUT 550 FEET & TURN LEFT AGAIN - my well is ABOUT 300' from the ROAD = Behind my house, at 9091, RD. S E, WARDEN, WA. 98857

## Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

## Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☒ YES ☐ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

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B. Does the applicant own the land on which the water source is located?

☒ YES ☐ NO

If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Joseph Brown  
Applicant (or authorized representative)

6-22-98  
Date

SAME  
Landowner for place of use (if same as applicant, write "same")

SAME  
Date

I have examined this application as required by SEPA and find that it is: ☐ not an "action".

☒ categorically exempt.

G330188

10/6/99  
DATE

Al Kifer  
SIGNATURE



Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff \_\_\_\_\_ Date \_\_\_\_\_

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To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).